**BEST**© (*Borderline Evaluation of Severity over Time*)

For the first 12 items, the highest rating (5) means that the item caused extreme distress, severe difficulties with relationships, and/or kept you from getting things done. The lowest rating (1) means it caused little or no problems. Rate items 13-15 (positive behaviors) according to frequency.

### A. Thoughts and Feelings [   ]

1. Worrying that someone important in your life is tired of you or is planning to leave you
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

2. Major shifts in your opinions about others such as switching from believing someone is a loyal friend or partner to believing that person is untrustworthy and hurtful
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

3. Extreme changes in how you see yourself. Shifting from feeling confident about who you are to feeling like you are evil, or that you don't even exist
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

4. Severe mood swings several times a day. Minor events cause major shifts in mood
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

5. Feeling paranoid or like you are losing touch with reality
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

6. Feeling angry
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

7. Feelings of emptiness
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

8. Feeling suicidal
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

### B. Behaviors (Negative) [   ]

9. Going to extremes to try to keep someone from leaving you
   - None/slight: 1
   - Mild: 2
   - Moderate: 3
   - Severe: 4
   - Extreme: 5

10. Purposely doing something to injure yourself or making a suicide attempt
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

11. Problems with impulsive behavior (not including suicide attempts or injuring yourself on purpose) Examples are: over-spending, risky sexual behavior, substance abuse, reckless driving, binge eating, other __________ (circle those that apply)
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

12. Temper outbursts or problems with anger leading to relationship problems, physical fights, or destruction of property
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

### C. Behaviors (Positive) [   ]

13. Choosing to use a positive activity in circumstances where you felt tempted to do something destructive or self-defeating
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

14. Noticing ahead of time that something could cause you emotional difficulties and taking reasonable steps to avoid/prevent the problem
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

15. Following through with therapy plans to which you agreed (e.g., talk therapy, "homework" assignments, coming to appointments, medications, etc.)
    - None/slight: 1
    - Mild: 2
    - Moderate: 3
    - Severe: 4
    - Extreme: 5

**To the clinician:** the total for each section (A, B, and C) should be recorded in the brackets following the section titles. At the top of the page record the total composite score (15 + A + B - C)

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